

Indigenous Health Incentive

The PIP Indigenous Health Incentive aims to support general practices and Indigenous health services to provide better health care for Aboriginal and Torres Strait Islander patients, including best practice management of chronic disease.

Overview

To be eligible for the PIP Indigenous Health Incentive, a practice must:

- participate in the PIP
- sign on to the Indigenous Health Incentive to be eligible for payments under this incentive
- meet the requirements of each payment of the Indigenous Health Incentive as outlined below.

The PIP Indigenous Health Incentive has three payments, which are summarised below.

Payment Type	Activity required for payment	Payment
Sign-on payment	One-off payment to practices that join the incentive and agree to undertake specified activities to improve the care provided to their Indigenous patients with a chronic disease. To claim the sign-on payment complete and submit an <i>Indigenous Health Incentive Application Form</i> . Sign-on payments are paid in the next available quarterly payment.	\$1 000 per practice
Patient registration payment	A payment to practices for each Indigenous patient aged 15 years and over, registered with the practice for chronic disease management for a 12 month period. To claim a patient registration payment complete and submit an <i>Indigenous Health Incentive and PBS Co-payment Measure Patient Registration Form</i> . Patient registration payments are paid in the next available quarterly payment.	\$250 per eligible patient per calendar year
Outcomes payments	Tier 1: a payment to practices for each registered patient for whom a target level of care is provided by the practice in a 12 month period (GPMP + Review or 2 x reviews). Tier 1 payments are automatically assessed and paid in the quarter following the provision of the required services.	\$100 per eligible patient per calendar year
	Tier 2: payment to practices for providing the majority of patient care for each registered patient within a 12 month period (determined by total number of eligible MBS services provided for the patient) Tier 2 payments are automatically assessed and paid annually in February.	\$150 per eligible patient per calendar year

After signing on for the Indigenous Health Incentive, practices are encouraged to submit patient registrations to Medicare Australia progressively.

A rural loading, ranging from 15 to 50 per cent, depending on the remoteness of the practice, is applied to the payments for practices located in Rural, Remote and Metropolitan Areas (RRMA) 3-7. For more information on PIP rural loading, refer to the [PIP Rural Loading Guidelines](#).



Practice obligations

The practice must:

- be able to substantiate its claims for payment by being able to provide:
 - evidence that a mechanism is in place to ensure their Aboriginal and Torres Strait Islander patients aged 15 years and over with a chronic disease are followed up
 - evidence of having completed appropriate cultural awareness training
 - records of patient consent
- provide information to Medicare Australia as part of its ongoing audit program to verify that the practice meets the PIP eligibility requirements
- ensure the information provided to Medicare Australia is accurate
- advise Medicare Australia, in writing, of any changes to practice arrangements by the relevant 'point in time' date or within 14 calendar days, whichever date is the earliest.

For further information telephone the Medicare Provider enquiry line on **132 150** or speak with your Practice Support Officer **9663 5958**.